

Orthopedic Surgeons and Rheumatology

June 16-17, 2016 Alicante, Spain

Ilizarov external fixation for management of severe relapsed clubfeet in older children

Mohamed El-Sayed
Tanta University, Egypt

Background: Although the standard treatment of clubfoot deformity is conservative by serial casting techniques, relapses are not uncommon. Management of relapsed clubfoot deformity in older children is an orthopedic challenge. There is a growing interest in management of such complex deformities using the Ilizarov technique.

Methods: In this study, the Ilizarov frame was used to correct severe relapsed clubfoot deformities in older children, whom underwent previous surgical interventions. 42 relapsed clubfeet were included. The Dimeglio classification was used for clinical assessment of the relapsed feet pre-operatively as well as post-operatively.

Results: After an average follow-up period of 4.6 years, and according to the Beatson and Pearson numerical assessment, favorable results (excellent or good) were found in 37 feet, while poor results took place in only five feet.

Conclusion: Based on the final clinical and radiographic results, the Ilizarov technique could be considered as a good management alternative for such severe deformities.

mhosney2012@hotmail.com

Fracture and sarcopenia – Dangerous association

Pedro Miguel Marques
Hospital Garcia de Orta, Portugal

Isolated dislocation of the trapezio-metacarpal (TMC) joint of the thumb is an uncommon hand injury. The lesion is usually the consequence of an axial transmitted force through a partially flexed thumb. Ligaments do not only represent the primary source of joint stability, but also set the limits of motion in conjunction with the passive tension of muscles. Therefore their integrity is essential to maintain the static and dynamic stability between the 1st metacarpal bone and the trapezium. The optimal treatment strategy for the acute thumb CMC joint dislocation remains a subject of debate. Closed reduction and cast, closed or open reduction with transfixion with Kirschner wires and reconstruction of ligament and capsulorrhaphy have been performed so far according to joint stability and surgeon's preference.

spotmarques@gmail.com